



**STATE OF ARIZONA
POLITICAL COMMITTEE
CAMPAIGN FINANCE REPORT**

FOR OFFICE USE ONLY

RECEIVED OCT 27 2008

1. CAMPAS FOR SUPERVISOR
Full Name of Committee

297 BERRIDGE DR.
Address

SIERRA VISTA 85635 COCHISE (520) 234-5498
City Zip Code County Phone #

2. _____
Sponsoring Organization (If applicable)

CHRISTOPHER T. CAMPAS, COCHISE BOARD OF SUPERVISORS
Name of Candidate and Office Sought (If applicable)

ctcampas@gmail.com
Email Address

_____ Fax#

3. ID# C2008-27

Primary Election: September 2, 2008
General Election: November 4, 2008

4. REPORTING PERIOD (Please Check Appropriate Box)		DUE BETWEEN
a.	<input type="checkbox"/> JANUARY 31ST REPORT- For Period of November 28, 2006 through December 31, 2007	January 1, 2008 and January 31, 2008
b.	<input type="checkbox"/> JUNE 30TH REPORT- For Period of January 1, 2008 through May 31, 2008	June 1, 2008 and June 30, 2008
c.	<input type="checkbox"/> PRE-PRIMARY ELECTION REPORT- For Period of June 1, 2008 through August 13, 2008	August 14, 2008 and August 21, 2008
d.	<input type="checkbox"/> POST-PRIMARY ELECTION REPORT- For Period of August 14, 2008 through September 22, 2008	September 23, 2008 and October 2, 2008
e.	<input checked="" type="checkbox"/> PRE-GENERAL ELECTION REPORT- For Period of September 23, 2008 through October 15, 2008	October 16, 2008 and October 23, 2008
f.	<input type="checkbox"/> POST-GENERAL ELECTION REPORT- For Period of October 16, 2008 through November 24, 2008	November 25, 2008 and December 4, 2008

5.	Summary	Column A Total This Reporting Period	Column B Election Period Total to Date
5a.	Total Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		\$ 0.00
5b.	Cash on Hand at the Beginning of this Reporting Period	92.58	
5c.	Total Receipts (from corresponding columns on Detailed Summary Page, line 8)	\$ 915.00	\$ 4940.00
5d.	Subtotal (add lines b and c for column A and add lines a and c for column b)	\$ 1007.58	\$ 4940.00
6a.	Total Debts and obligations from Previous Campaign Committee at Beginning of this election Period (or at time Statement of Organization was filed for the new committee) (Do not add or subtract this line from the other lines)		\$ 0.00
6b.	Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	\$ 782.27	\$ 4714.69
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	\$ 225.31	\$ 225.31

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2

1. Committee Name CAMPAS FOR SUPERVISOR

2. ID #

3. Report covering period of 9-23-08 — 10-15-08

RECEIPTS

Column A This Period	Column B Campaign to Date
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4. Contributions other than loans and in-kind:
 - (a) Individuals - more than \$25 (Total from Schedule A)
 - (b) Individuals - aggregate \$25 or less (Total from Schedule A-1)
 - (c) Political Committees (Total from Schedule B)
 - (d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]
 - (e) Refund of contributions (Total from Schedule F-2)
 - (f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]
5.
 - (a) Loans made or guaranteed by candidate (Total from Schedule C)
 - (b) All other loans (Total from Schedule C-1)
 - (c) Total Loans [add 5(a) and 5(b)]
6. In-kind contributions (Total from Schedule E)
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)
8. Total Receipts [add 4(f), 5(c), 6, and 7]

\$ 525.00	\$ 875.00
\$ 390.00	\$ 390.00
\$ 915.00	\$ 1265.00
\$ 915.00	\$ 1265.00
\$ 915.00	\$ 1265.00

DISBURSEMENTS

9. Expenditures for operating expenses (Total from Schedule D)
10. Independent Expenditures (Total from Schedule D-1)
11. Value of In-kind expenditures (Total from Schedule E)
12. Loans made by reporting committee (Total from Schedule D-2)
13.
 - (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)
 - (b) Repayment of all other loans (Total from Schedule D-5)
 - (c) Total Loan Repayments [add 13(a) and 13(b)]
14. Transfers to other political committees (Total from Schedule D-6)
15. Any other disbursement (Total from Schedule D-7)
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)
18. Total disbursements [subtract line 17 from line 16]
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)

\$ 782.27	\$ 4714.69
\$ 782.27	\$ 4714.69
\$ 782.27	\$ 4714.69

20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and complete.

Yolanda Campas

Type or Print Name of Treasurer

Yolanda Campas

Signature of Treasurer or Candidate or Designating Individual

10-27-08

Date

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name CAMPAS FOR SUPERVISOR

2. ID#

3. Report covering period from 9-23-08 thru 10-15-08

CONTRIBUTIONS		DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR				
a	Name <u>Laura and Brad Snyder</u> Street Address <u>1751 E. Kachina Trail</u> City <u>Sierra Vista</u> State <u>AZ</u> Zip <u>85650</u> Occupation <u>Program Analyst</u> Employer <u>JITC</u>	10-4-08	\$ 50.00	\$ 50.00
b	Name <u>DM Wellman</u> Street Address <u>2401 Mockingbird Dr.</u> City <u>Sierra Vista</u> State <u>AZ</u> Zip <u>85635</u> Occupation <u>Retired</u> Employer	10-11-08	\$ 25.00	\$ 50.00
c	Name <u>Maria Robinson</u> Street Address <u>781 Stepe Pl.</u> City <u>Sierra Vista</u> State <u>AZ</u> Zip <u>85635</u> Occupation <u>Paraprofessional</u> Employer <u>SVPS</u>	10-12-08	\$ 100.00	\$ 100.00
d	Name <u>Allen Wright</u> Street Address <u>2257 Golf Links Rd</u> City <u>Sierra Vista</u> State <u>AZ</u> Zip <u>85635</u> Occupation Employer	10-11-08	25.00	25.00
e	Name <u>Marianne S. Valladares</u> Street Address <u>1451 E Redrock Dr</u> City <u>Sierra Vista</u> State <u>AZ</u> Zip <u>85650</u> Occupation <u>US Govt.</u> Employer	received 7-11-08 deposited 10-13-08	25.00	25.00
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A (Transfer total to Detailed Summary Page, Line 4(a), Column A)			

*If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

Schedule A Page 1 of 2

revised 4/2003

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

1. Committee Name CAMPAS FOR SUPERVISOR

2. ID#

3. Report covering period from 9-23-08 thru 10-15-08

CONTRIBUTIONS		DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR				
a	Name <u>Matt Heinz</u> Street Address <u>717 S 2nd Ave.</u> City <u>Tucson</u> State <u>AZ</u> Zip <u>85701</u> Occupation <u>Physician</u> Employer <u>IPG Hospitals of AZ Inc</u>	10-12-08	\$ 100. ⁰⁰	\$ 200. ⁰⁰
b	Name <u>Richard Machold</u> Street Address <u>5418 E 6th St.</u> City <u>Tucson</u> State <u>AZ</u> Zip Occupation Employer	10-12-08	\$ 50. ⁰⁰	\$ 100. ⁰⁰
c	Name <u>Ruth Bunny Davis</u> Street Address <u>2934 N. St. Augustine Pl</u> City <u>Tucson</u> State <u>AZ</u> Zip <u>85712</u> Occupation <u>Retired Atty.</u> Employer	10-12-08	\$ 100. ⁰⁰	\$ 225. ⁰⁰
d	Name <u>Helen Hiddessen</u> Street Address <u>4701 S Le Donna Ln</u> City <u>Sierra Vista</u> State <u>AZ</u> Zip <u>85650</u> Occupation Employer	10-13-08	\$ 50. ⁰⁰	\$ 100. ⁰⁰
e	Name Street Address City State Zip Occupation Employer			
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A (Transfer total to Detailed Summary Page, Line 4(s), Column A)		\$ 525. ⁰⁰	\$ 875. ⁰⁰

*If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

2. ID#

1. Committee Name CAMPAS FOR SUPERVISOR

3. Report covering period from 9-23-08 thru 10-15-08

CONTRIBUTIONS		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN DATE TO
IDENTITY OF CONTRIBUTOR AND DATE RECEIVED			
4. a. ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
	Cochise County Democratic Committee P.O. Box 3233 Sierra Vista AZ 85636	\$ 390.00	\$ 390.00
b. ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
c. ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
d. ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
e. ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
f. ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
g. ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
h. ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
i. ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B (If last page of Schedule B, transfer total to Detailed Summary Page, Line 4(c), Column A)	\$ 390.00	\$ 390.00

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2 ID#

1. Committee Name CAMPAS FOR SUPERVISORS3. Report covering period from 09-23-08 thru 10-15-08

EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
a. Name <u>Cox Media</u> Street Address <u>150 E. Wilcox Dr</u> City <u>Sierra Vista</u> State <u>AZ</u> Zip <u>85635</u> Description of Items or Services Purchased <u>Commercial</u>		<u>10-15-08</u>	<u>\$ 772.07</u>
b. Name <u>Pay Pal</u> Street Address <u>P.O. Box 45950</u> City <u>Omaha</u> State <u>NE</u> Zip <u>68145-0950</u> Description of Items or Services Purchased <u>User Processing Fee</u>		<u>10-12-08</u>	<u>\$ 1.75</u>
c. Name <u>Pay Pal</u> Street Address <u>P.O. Box 45950</u> City <u>Omaha</u> State <u>NE</u> Zip <u>68145-0950</u> Description of Items or Services Purchased <u>User Processing Fee</u>		<u>10-12-08</u>	<u>13.20</u>
d. Name <u>Pay Pal</u> Street Address <u>P.O. Box 45950</u> City <u>Omaha</u> State <u>NE</u> Zip <u>68145-0950</u> Description of Items or Services Purchased <u>User Processing Fee</u>		<u>10-12-08</u>	<u>\$ 1.46</u>
e. Name <u>Pay Pal</u> Street Address <u>P.O. Box 45950</u> City <u>Omaha</u> State <u>NE</u> Zip <u>68145-0950</u> Description of Items or Services Purchased <u>User Processing Fee</u>		<u>10-12-08</u>	<u>\$ 0.59</u>
f. Name <u>Pay Pal</u> Street Address <u>P.O. Box 45950</u> City <u>Omaha</u> State <u>NE</u> Zip <u>68145-0950</u> Description of Items or Services Purchased <u>User Processing Fee</u>		<u>10-12-08</u>	<u>\$ 3.20</u>
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D (If last page of Schedule D, transfer total to Detailed Summary Page Line 9, Column A)			<u>\$ 782.27</u>